

PERIODIC RETENTION/CAREER DEVELOPMENT REPORT

COMMAND:		UIC:		REPORT FOR MONTH/QTR/YEAR																																																																		
Career Development Team Number Assigned _____ Number CDT Trained _____ Percent of Team Trained _____ Counselor-to-Client Ratio _____ (Minimum required 30:1)		Command Retention Actions for Report Period <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">Zone A</th> <th style="text-align: center;">Zone B</th> <th style="text-align: center;">Zone C</th> </tr> </thead> <tbody> <tr> <td>At EAOS</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Before EAOS Losses</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Reenlisted</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>6YO Extensions</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Reenlistment Rate</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Attrition Rate</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table> <p>Formulas: Reenlistment Rate = Reenlisted/At EAOS Attrition Rate - Before EAOS Losses/At EAOS + Before EAOS Losses + 6YO extensions</p>					Zone A	Zone B	Zone C	At EAOS	_____	_____	_____	Before EAOS Losses	_____	_____	_____	Reenlisted	_____	_____	_____	6YO Extensions	_____	_____	_____	Reenlistment Rate	_____	_____	_____	Attrition Rate	_____	_____	_____																																					
	Zone A	Zone B	Zone C																																																																			
At EAOS	_____	_____	_____																																																																			
Before EAOS Losses	_____	_____	_____																																																																			
Reenlisted	_____	_____	_____																																																																			
6YO Extensions	_____	_____	_____																																																																			
Reenlistment Rate	_____	_____	_____																																																																			
Attrition Rate	_____	_____	_____																																																																			
E1/E4 Success Workshop Total of Courses Conducted _____ Number of Personnel Attended _____ Total # of E1-E4 Onboard _____ Total # of E1-E4 Trained _____ Percentage of E1-E4 Trained _____		Career Development Boards (CDB) <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">E1-E4</th> <th style="text-align: center;">E5-E6</th> <th style="text-align: center;">E7-E9</th> </tr> </thead> <tbody> <tr> <td>Number of personnel before the board for:</td> <td></td> <td></td> <td></td> </tr> <tr> <td>"A" School/Striker Designator</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Special Programs</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Commissioning Programs</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Advancement</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Other</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Total</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table>					E1-E4	E5-E6	E7-E9	Number of personnel before the board for:				"A" School/Striker Designator	_____	_____	_____	Special Programs	_____	_____	_____	Commissioning Programs	_____	_____	_____	Advancement	_____	_____	_____	Other	_____	_____	_____	Total	_____	_____	_____																																	
	E1-E4	E5-E6	E7-E9																																																																			
Number of personnel before the board for:																																																																						
"A" School/Striker Designator	_____	_____	_____																																																																			
Special Programs	_____	_____	_____																																																																			
Commissioning Programs	_____	_____	_____																																																																			
Advancement	_____	_____	_____																																																																			
Other	_____	_____	_____																																																																			
Total	_____	_____	_____																																																																			
Transition Assistance Number of Personnel Separated _____ Number of Personnel who attended Transition Assistance Workshop _____ Number who attended Career Reenlistment Incentive Team (CARIT) Brief only _____ Percentage of personnel who completed DD Form 2648/Transition Counseling _____ Number of personnel separated who attended Transition Assistance less than 90 days prior to separation _____ Number of personnel who attended Transition Counseling this reporting period _____		Advancement Results (Most recent cycle) <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">E4</th> <th style="text-align: center;">E5</th> <th style="text-align: center;">E6</th> <th style="text-align: center;">E7</th> <th style="text-align: center;">E8</th> <th style="text-align: center;">E9</th> </tr> </thead> <tbody> <tr> <td>TIR Eligible</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Participated</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>PNA</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Failed</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Selected</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Percent Advanced</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table> <p style="text-align: center;">Command Advancement Program (CAP) Calendar YTD</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">E4</th> <th style="text-align: center;">E5</th> <th style="text-align: center;">E6</th> </tr> </thead> <tbody> <tr> <td>Number Authorized Per Year</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Number Advanced to Date</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>Remaining CY CAPs available</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table>					E4	E5	E6	E7	E8	E9	TIR Eligible	_____	_____	_____	_____	_____	_____	Participated	_____	_____	_____	_____	_____	_____	PNA	_____	_____	_____	_____	_____	_____	Failed	_____	_____	_____	_____	_____	_____	Selected	_____	_____	_____	_____	_____	_____	Percent Advanced	_____	_____	_____	_____	_____	_____		E4	E5	E6	Number Authorized Per Year	_____	_____	_____	Number Advanced to Date	_____	_____	_____	Remaining CY CAPs available	_____	_____	_____
	E4	E5	E6	E7	E8	E9																																																																
TIR Eligible	_____	_____	_____	_____	_____	_____																																																																
Participated	_____	_____	_____	_____	_____	_____																																																																
PNA	_____	_____	_____	_____	_____	_____																																																																
Failed	_____	_____	_____	_____	_____	_____																																																																
Selected	_____	_____	_____	_____	_____	_____																																																																
Percent Advanced	_____	_____	_____	_____	_____	_____																																																																
	E4	E5	E6																																																																			
Number Authorized Per Year	_____	_____	_____																																																																			
Number Advanced to Date	_____	_____	_____																																																																			
Remaining CY CAPs available	_____	_____	_____																																																																			
Program Applications Number of Applications submitted for: GUARD 2000 _____ STAR _____ SCORE/Conversions _____ Special Programs _____ "A" School Requests _____ PTS Submissions _____ Senior Enlisted Academy _____ STA-21 _____ MECP _____ LDO/CWO _____ OCS/AOCS _____ Other _____	High School Education Number of personnel without HS Diploma/GED _____ Number of personnel working toward GED _____ Number of personnel who completed GED this period _____ <p style="text-align: center;">USMAP Program</p> Number of personnel enrolled _____ Number of Journeyman Certificates issued _____ <p style="text-align: center;">AFCT Testing</p> Number of personnel retested _____		Indoctrination Number of personnel reported: _____ Number of personnel attended Indoctrination Training _____ <p style="text-align: center;">Additional CDTC Training (Optional)</p> Number E5-O4 Onboard _____ Number E5-O4 CDTC Trained _____ Percent E5-O4 CDTC Trained _____ <p style="text-align: center;">HARP/OHARP/SEMINAR</p> Number Personnel Participated _____																																																																			